

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NW	71531	15-12-99
O.I.P.E. CLASSIFIER		16	5-12-99
FORMALITY REVIEW		61581	5-21-99

INDEX OF CLAIMS

BEST AVAILABLE COPY

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)..... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
Final Original	
1	8/21/01
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Claim	Date
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If more than 150 claims or 10 actions  
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